

Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name) Reed, Chuck Agency Name City of San Jose, Mayor's Office Agency Street Address 200 E. Santa Clara Street, 18th Floor, San Jose, CA 95113 Designated Contact Person (Name and title, if different) Richard Hong, Agenda Services Manager Area Code/Phone Number 408-535-4800 E-mail (Optional) mayoremail@sanjoseca.gov		RECEIVED San Jose City Clerk Date Stamp 2013 JUL 25 AM 8:59	California Form 803 For Official Use Only
<input type="checkbox"/> Amendment (See Part 5) Date of Original Filing: 01/09/2012 (month, day, year)			

2. Payor Information (For additional payors, include an attachment with the names and addresses.)

Brocade Name			
130 Holger Way	San Jose	CA	95134
Address	City	State	Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)

Destination: Home Name			
3180 Newberry Drive, Suite 200	San Jose	CA	95118
Address	City	State	Zip Code

4. Payment Information (Complete all information.)

Date of Payment: 9/12/2012 (month, day, year) **Amount of Payment:** (In-Kind FMV) \$ 10,000.00 (Round to whole dollars.)
Payment Type: ☒ Monetary Donation or ☐ In-Kind Goods or Services (Provide description below.)

Brief Description of In-Kind Payment: _____

Purpose: (Check one and provide description below.) ☐ Legislative ☐ Governmental ☒ Charitable
Describe the legislative, governmental, charitable purpose, or event: Breakfast fundraiser for Destination: Home and Housing 1000 to support homeless issues.

5. Amendment Description or Comments

San Jose DFR 1 filed 1/10/13

6. Verification

I certify, under penalty of perjury under the laws of the State of California, that to the best of my knowledge, the information contained herein is true and complete.

Executed on 7/24/13 DATE By Chuck Reed SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER